

PAMLICO COUNTY HIGH SCHOOL

EMPLOYEE ABSENCE REPORT

Absence Forms MUST be turned in to the school bookkeeper as soon as you know of a scheduled absence or by 8:00 am the following school day after an unscheduled absence.

Employee's Name: _____

Date of Absence(s): _____

full Days _____

1/2 day mornings _____ # 1/2 day afternoons _____

Check Box Next to Absence Code:

<u>Absence Codes</u>	<u>Description</u>
1	Sick Leave – No Deduction Personal Illness, Illness in Immediate Family, Death in Immediate Family, or Medical Appointment (Absences in excess of 5 days require a doctor's note.)
4	Professional Leave – No Deduction Staff Development, Field Trip, or Jury Duty (Approved Documentation needed: SEA System Form , Field Trip Form or Letter from Court)
6	Personal Leave – \$50 Deduction Only applicable to certified teachers that require a substitute.
7	Absence Without Pay – Day's Pay Deduction
20	Annual Leave/Vacation – No Deduction
26	Personal Leave – No Deduction May be used on a non-protected teacher workday that is not before or after a holiday/vacation day scheduled on the school calendar. Only applicable to certified teachers/media coordinators.
29	Bonus Leave – No Deduction Applicable to non-certified personnel who have leave balances in this category.
COMP	Comp Time (applies only to non-certified employees) **Must have prior approval** Days Comp time was earned: _____

Employee's Signature: _____ Date: _____

Principal's Signature: _____ Date: _____

Office Use Only:	SEA # _____
Substitute: _____	Date: _____
Substitute: _____	Date: _____
Substitute: _____	Date: _____